



APPLICATION FOR REGISTERED VETERINARY TECHNICIAN EXAMINATION

Please type or print legibly

1. Mark appropriate fees and indicate which exam eligibility category you are applying under: <div style="display: flex; justify-content: space-between; align-items: flex-start; margin-top: 10px;"> <div style="width: 30%;"> <input checked="" type="checkbox"/> RVT Examination Fee \$75.00 <u>\$75.00</u> <input type="checkbox"/> Live Scan <u>No fee to VMB</u> </div> <div style="width: 30%;"> <input type="checkbox"/> Category 1 <input type="checkbox"/> Category 2 <input type="checkbox"/> Category 3 <input type="checkbox"/> Category 4 <input type="checkbox"/> Category 5 <input type="checkbox"/> Category 6 </div> <div style="width: 30%; font-style: italic;"> Application will be returned unless one of these boxes is checked. Do not attempt to prepare this form before reading instructions. </div> </div> <div style="margin-top: 10px;"> Total Submitted _____ </div> <p style="font-size: small; margin-top: 10px;">Please remit fees by check or money order payable to the RVTC.</p>				For Office Use Only							
2. Disclosure of your United States social security number is mandatory. Section 30 of the Business and Professions Code and Public Law 94-455 (42 USCA 405(c)(2)(C)) authorize collection of your social security number. Your social security number will be used exclusively for tax enforcement purposes, for purposes of compliance with any judgement or order for family support in accordance with Section 17520 of the Family Code, or for verification of licensure or examination status by a licensing or examination entity which utilizes a national examination and where licensure is reciprocal with the requesting state. If you fail to disclose your social security number, you will be reported to the Franchise Tax Board, which may assess a \$100 penalty against you. <p style="font-size: x-small; margin-top: 10px;">All items in this application are mandatory; none are voluntary. Failure to provide any of the requested information will result in the application being rejected as incomplete. The information provided will be used to determine qualification for licensure, per Section 4846 of the Business and Professions Code which authorizes the collection of this information. Information regarding the issuance or denial of a license by the Board may be transmitted to any other veterinary medical licensing authority. Candidates have the right to review their application subject to the provisions of the Information Practices Act. The Executive Officer is the custodian of records.</p>											
Email Address: _____		U.S. Social security number: _____									
3. Full name: Last First Middle		4. Birthdate: (month/day/year)									
5. Current mailing address: Street and number		City	State								
6. Permanent residence address: Street and number		City	State								
7. List highest grade you have completed in school, including college:		Date Completed	8. High school attended:								
9. List colleges and/or registered veterinary technician schools attended:											
Name and Location of Institution		Attendance		Course		Date of Graduation		Degree Received			
		From To									
10. List all states/provinces in which you are registered as an RVT:											
State			Registration No.			State			Registration No.		

(OVER)

11. Have you ever applied to take the California Registered Veterinary Technician Examination? <i>If you answered yes, please list date(s):</i> _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
12. Have you ever taken the California Registered Veterinary Technician Examination? <i>If you answered yes, please list all dates:</i> _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
13. Have you had disciplinary proceedings against any registration, license, or certificate as a veterinary technician or any veterinary related license including revocation, suspension, probation, voluntary surrender, or any other proceeding? <i>If yes, please provide detailed written explanation, include the date and state where the discipline occurred:</i> _____ _____ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
14. Have you been convicted of any offense other than minor traffic violations or pled nolo contendere to any violation of any law of any state, the United States, or a foreign country? <i>If yes, explain fully as described in the application instructions.:</i> _____ _____ _____ _____ <i>Convictions must be reported even if they have been expunged under Section 1203.4 of the Penal Code or if a diversion program has been completed under the Penal Code or Article 5 or the Vehicle Code. Traffic violations involving driving under the influence, injury to persons or providing false information must be reported. The definition of conviction includes convictions following a plea of nolo contendere (no contest), as well as pleas or verdicts of guilty. YOU MUST INCLUDE MISDEMEANOR AS WELL AS FELONY CONVICTIONS.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
15. I understand that I am required to report immediately to the California Registered Veterinary Technician Committee if I am convicted of ANY offense that occurs between the date of this application and the date that a California registered veterinary technician certificate is issued. I am also required to report to the California Registered Veterinary Technician Committee any disciplinary action and /or voluntary surrender against ANY registration, license, or certificate as a veterinary technician or any veterinary related license that occurs between the date of this application and the date that a California registered veterinary technician certificate is issued. I understand that failure to do so may result in denial of this application or subsequent disciplinary action against my certification. I certify, under penalty of perjury under the laws of the State of California, that all the information provided in connection with this application for registration examination is true, correct, and complete. Providing false information or omitting required information is grounds for denial of registration or registration revocation in California.	

Signature of Applicant _____ Date_____

Certification signature and date required of **ALL** applicants. Failure to sign and date application will DELAY application approval.